


IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Leon, et al.
Title: Data Repair Enhancements for
Multicast/Broadcast Data
Distribution
Appl. No.: Unknown
Filing Date: Herewith
Examiner: Unknown
Art Unit: Unknown

CERTIFICATE OF EXPRESS MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450.	
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Line Gauthier (Printed Name)	
 (Signature)	

UTILITY PATENT APPLICATION TRANSMITTAL

Mail Stop PATENT APPLICATION
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

David Leon
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Enclosed are:

- ☒ [X] Specification, Claim(s), and Abstract (20 pages).
- ☐ [X] Formal drawings (4 sheets, Figures 1A, 1B, 2A, 2B, 3, 4).
- ☒ [X] Application Data Sheet (37 CFR 1.76).

The filing fee is calculated below:

	Claims as Filed		Included in Basic Fee		Extra Claims		Rate		Fee Totals
Basic Fee							\$770.00	=	\$770.00
Total	24	-	20	=	4	x	\$18.00	=	\$72.00
Claims:									
Independents	8	-	3	=	5	x	\$86.00	=	\$430.00
If any Multiple Dependent Claim(s) present:						+	\$290.00	=	\$0.00
Surcharge under 37 CFR 1.16(e) for late filing of Executed Declaration						+	\$130.00	=	\$130.00
							SUBTOTAL:	=	\$1402.00
[]							Small Entity Fees Apply (subtract ½ of above):	=	\$0.00
							TOTAL FILING FEE:	=	\$1,402.00

- [X] A check in the amount of \$1,402.00 to cover the filing fee is enclosed.
- [] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1450. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1450.

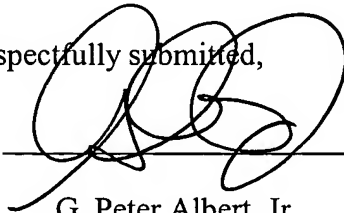
Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Date MARCH 29, 2004

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Respectfully submitted,

By


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